



SPH PORTAL

**COLLECTIVE ACTIONS
FOR HEIGHTENED PREPAREDNESS**

**OVERVIEW OF THE STRATEGIC
PARTNERSHIP FOR IHR (2005) AND
HEALTH SECURITY (SPH) PORTAL**

COLLABORATION - COORDINATION - COOPERATION



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TABLE OF CONTENTS

FOREWORD	04	Joint External Evaluation	25
ACKNOWLEDGEMENTS	05	Simulation Exercises	27
LIST OF ABBREVIATIONS	05	After Action Reviews	28
01. INTRODUCTION	07	National Action Plan for Health Security (NAPHS)	29
02. ABOUT SPH	10	One Health Operations	30
03. LEADERSHIP	13	Experts	31
04. NETWORKS	15	Partner Matching Resources	31
Partner Matching	16	• Donor and Partner Landscape	31
Antimicrobial resistance (AMR) support activities	16	• Country profiles	33
Pandemic Influenza Preparedness Plan	18	• Donor profiles	34
Universal Health Coverage (UHC)			
and Health Systems	19		
05. RESOURCES	22	06. FORUM	36
IHR Monitoring and Evaluation Framework	24	07. FEATURES	38
States Parties Annual Report (SPAR)	24	News	38
		Calendar	38
		Publications	39
		Multimedia	39
		• Photo gallery & Videos	39
		08. VALIDATION PROCESS	41



FOREWORD

The purpose of this document is to provide Member States, partners and donors with the necessary information to understand and make use of the capabilities of the SPH Portal. This document provides an overview of the online portal, describing the context of its development in the wake of the Ebola crisis in West Africa, the endorsement and use of the portal by the G7, and the evolution of the portal into a global platform for the facilitation of multisectoral partnerships, the mobilization of financial and technical resources, and the identification of national priorities, gaps, and needs to build and maintain country capacities for implementation of the International Health Regulations (IHR, 2005). This document details the features of the portal and outlines how it can be used to facilitate collaboration for strengthening national, regional and global health security.

The portal is operated and maintained by the WHO Strategic Partnership for IHR and Health Security (SPH), and is an essential component of SPH's work to support Member States, partners and donors in building a collective, coherent and synergistic approach for strengthening health security and accelerating IHR (2005) implementation. The portal facilitates SPH resource mapping and multisectoral partnership coordination for implementation of health security action plans, and is central to efforts to create a global preparedness network.

The portal also serves Member States, partners and donors as a common platform for the sharing and exchange of information on health security investments and activities on a national, regional and global scale, facilitating alignment and harmonization of initiatives.

The portal makes IHR Monitoring and Evaluation Framework documents and data available to stakeholders, matches partners with countries based on needs, gaps and resources, tracks health security activities, provides tools, guides and a registry of technical experts, highlights news related to health security, and hosts the Strategic Partnership Networks, which brings together the networks of antimicrobial resistance (AMR), pandemic influenza preparedness (PIP), universal health coverage (UHC) and health systems in collaboration.

The SPH Portal is constantly expanding with the addition of new partners providing information on their investments. This document aims to show stakeholders how the extensive data and unique features found on the portal can support their efforts to build health security capacities and contribute to accelerating the implementation of IHR (2005).



ACKNOWLEDGEMENTS

The WHO Strategic Partnership for IHR and Health Security (SPH) Portal was developed by Mr Ludy Suryantoro, Mr Glenn Lolong, Ms Romina Stelter and Mr Barnas Thamrin, with special acknowledgment for the work of Mr Thamrin in managing the portal and its continued expansion.

The WHO SPH team would like to express sincere gratitude to those who have made contributions to the portal, especially Dr Jaouad Mahjour and Dr Stella Chungong. Contributors include Dr Guillaume Belot, Mr Frederik Copper, Dr Nirmal Kandel, Dr Landry Mayigane, Mr Daniel Menucci, Dr Elizabeth Mumford, Mr Abbas Omaar, Mrs. Nathalie Roberts, Dr Stéphane de la Rocque, Mr Reza Sasanto, Dr Rajesh Sreedharan and Dr Weigong Zhou. Special thanks also to WHO Regional and Country offices for their contributions.

The World Health Organization (WHO) is particularly grateful to the partners and donors who provide data on their global health security investments and activities to the portal, facilitating the sharing and exchange of information and the alignment of country and partner initiatives.

LIST OF ABBREVIATIONS

AAR After Action Review
AMR Antimicrobial Resistance
CPI Country Health Emergency Preparedness and IHR Department
DOI Declaration of Interest
GHSA Global Health Security Agenda
GSPN Global Strategic Preparedness Networks
IHR International Health Regulations
JEE Joint External Evaluation
MEF Monitoring and Evaluation Framework
NAPHS National Action Plan(s) for Health Security
NBW IHR-PVS National Bridging Workshops
PVS Performance of Veterinary Services
REMAP Resource Mapping Tool
SDG Sustainable Development Goals (SDGs)
SPAR States Parties Annual Report
SPH Strategic Partnership for International Health Regulations (2005) and Health Security
UHC Universal Health Coverage
URL Uniform Resource Locator
WHA World Health Assembly
WHO World Health Organization



1 INTRODUCTION



1. INTRODUCTION

2015 Cape Town Meeting

"Improving global health emergency preparedness requires effective engagement with all Member States and across multiple sectors"

"WHO will take an evidence-based and innovative approach that is results-oriented and responsive, maximizes inclusive partnership and ensures collective priority setting with all stakeholders."



Cape Town, South Africa 12 -15 July 2015  World Health Organization
Building Health Security Beyond Ebola



Throughout history and in recent years, disease outbreaks have taken a heavy toll on populations around the world. Recent events include the Ebola crisis in West Africa in 2014 and 2015, and Democratic Republic of the Congo in 2018; the 2016 Zika virus outbreak; multiple cholera outbreaks in Africa and the Middle East; Rift Valley fever in Eastern Africa, and yellow fever outbreaks in Angola and the Democratic Republic of the Congo. The risk of communicable disease outbreaks poses a threat to economic development and can destabilize societies. The spread of diseases increases significantly where health systems are weak and fragile, and the world must be better equipped and prepared to respond to current health emergencies and prevent future health crises. In an effort to build, advance, and deliver global health security, WHO held a series of global meetings between 2015 and 2017 in which Member States committed to provide national leadership and sustained support and resources for global health security; WHO committed to play an active **coordinating, convening and monitoring role**; and partners committed to work closely with WHO and each other in sharing relevant information, and making their technical and funding contributions as complementary, synergistic and coordinated as possible. These commitments set the stage for investment – domestic and international - in country preparedness to prevent, detect and respond to public health events and emergencies.

The SPH Portal was established in response to the **high-level meeting on building health security beyond Ebola**, which took place in Cape Town between 13 and 15 July 2015. The meeting was convened by the Government of South Africa and WHO to encourage cooperative work between countries, WHO and partners in building sustained preparedness for future health emergencies and strengthening national, regional and global health security. As an outcome of the meeting, Member States, partners, donors and other stakeholders requested WHO to develop a one-stop site for information on the overarching global health security landscape. The objective was to facilitate alignment and harmonization for collaboration between global health security stakeholders under the convening power for coordination by WHO.

The online SPH Portal (<https://extranet.who.int/sph/>) operates on the key principles that coordination and alignment of partner initiatives are needed to

make them as complementary as possible, that there is a need to ensure that all countries needing assistance will receive it, and that country ownership and support for country health security priorities is essential.

Implementing the International Health Regulations (IHR, 2005) through Collective Action

The International Health Regulations (IHR) – approved by all Member States of WHO in 2005 and entered into force worldwide in 2007 – require countries to develop, strengthen and maintain minimum national core public health capacities to detect, assess, notify and respond to events that may constitute a public health emergency of international concern¹. The role of WHO in facilitating collaboration and assistance in capacity-building is specified in Article 44.2 of IHR (2005), which states that *"WHO shall collaborate with States Parties, upon request, to the extent possible, in: (a) The evaluation and assessment of their public health capacities in order to facilitate the effective implementation of these Regulations; (b) The provision or facilitation of technical cooperation and logistical support to States Parties; and (c) the mobilization of financial resources to support developing countries in building, strengthening and maintaining the capacities provided for in Annex 1"*. In order to develop baseline capacities of Member States, the World Health Assembly resolution "WHA 69.21" further identified WHO's critical convening role to facilitate strategic cooperation and partnership between and within States Parties along with regional and international partners, donors and networks. The WHO Strategic Partnership for IHR and Health Security (SPH) is designed to foster these relationships, working in close cooperation with the WHO regional and national offices.

1. <https://apps.who.int/iris/bitstream/handle/10665/246107/9789241580496-eng.pdf?sequence=1&isAllowed=y>





ABOUT SPH



ABOUT SPH

The implementation of the IHR Monitoring and Evaluation Framework will draw on WHO's convening role to facilitate strategic cooperation and generate collaborative dynamics between and within countries; as such SPH will play a catalytic role in promoting/ensuring coordination and harmonization among countries, partners and donors in the implementation of the IHR capacities. The SPH Portal is central to this effort, serving as an interactive web-based platform that facilitates the sharing and exchange of information on current and future health security activities and investments.

SPH PORTAL

The SPH Portal provides stakeholders with documents, data and resources covering key areas vital for global health security, such as One Health operations, health systems, universal health coverage (UHC), pandemic influenza preparedness, antimicrobial resistance (AMR), and International Health Regulations (IHR, 2005).

The SPH Portal also acts as a centralized source for IHR monitoring and evaluation reports, including Joint External Evaluations (JEE's), States Parties Self-Assessment Annual Reporting and National Action Plans for Health Security (NAPHS). The portal links stakeholders with experts and online training, and matches countries and partners based on needs, gaps and resources. The portal offers a one-stop platform where partners and donors can identify gaps in country health security capacity, determine opportunities to target their financial and technical resources for the maximum public health benefit and discover mechanisms to partner with countries.

The portal, which was previously known as the WHO Strategic Partnership Portal, earned the recognition of the Group of 7 (G7) nations at their 2016 summit in Japan. The G7 Ise-Shima Vision for Global Health¹ emphasized the need for collective effort and partner coordination for IHR (2005) strengthening and "the value of providing necessary information to new initiatives to share information, such as WHO's Strategic Partnership Portal, while ensuring the information shared among the donors to be comparable and avoiding any fragmentation."

The portal works in concert with SPH resource mapping and multisectoral preparedness coordination to support development and implementation of country health security action plans. The portal provides a visualization of the global, regional and national health security investment landscape that stakeholders can draw upon to identify needs and gaps, inform priorities and align initiatives.

Between the 2015 establishment of the SPH Portal and June 2019, the SPH team monitored and tracked through the portal more than 1800 partner and donor health security investments across the globe, while 180 countries regularly accessed the portal. This number of investments tracked through the portal is constantly growing, as is the list of partners who provide SPH with data on their bilateral and multilateral health security investments. The portal is continually updated as new data is received and verified.

RESOURCE MAPPING

The portal enhances the effectiveness of the SPH resource mapping tool (REMAP), which shows Member States what resources exist for activities that contribute to the implementation of national health security plans. The REMAP tool maps the health security projects donors are supporting within the country, allowing policymakers, donors and partners to see where gaps exist and where more investment of financial and technical resources is needed.

Countries can also use the tool to prioritize health security activities, facilitate the harmonization of country plans, and monitor progress in completing the activities required to implement national health security action plans. The



tool tracks plan implementation and demonstrates the effect of completed activities on overall health security through an impact analysis. The impact analysis can identify which activities provide maximum public health benefits for minimal investment. The country maintains ownership of the resource mapping data. While the resource mapping data does not necessarily appear on the SPH Portal, the portal's broader visualization of IHR and health security investments complements resource mapping to give countries insight into the health security investment landscape from the sub-national to the global level.

MULTISECTORAL PREPAREDNESS COORDINATION

The SPH team is also supporting countries through multisectoral preparedness coordination, developing a guide and tool/checklist to assist countries in establishing multisectoral coordination mechanisms for preparedness.

Multisectoral coordination and collaborative approaches are necessary to implement national health security plans and strengthen and sustain country core IHR (2005) capacities. The SPH Portal provides a platform to ensure relevant information from countries, donors and partners can be shared in a timely manner, facilitating such coordination. Exchange of information through the portal, with Member States and other partners providing health security data that is accessible to all countries, also supports SPH work to promote national cross-sectorial coordination, such as between the civilian and military health sectors, among parliamentarians and national health ministries, and through leveraging synergies between influenza pandemic preparedness and health security planning.

International initiatives such as the G7, the G20, the World Bank Group Pandemic Emergency Financing Facility and Regional Disease Surveillance Systems Enhancement (REDISSE), support the integration of health systems, health security, and public health emergency preparedness. Achieving this requires sustainable multisectoral commitment, collaboration, and coordinated approaches, both nationally and internationally, with the goal of building health security at all levels of society. These efforts must include the

entire health sector and other relevant stakeholders beyond health - public and private, civil society, international partners and donors. A goal of SPH is to ensure that Member States, partners, donors and other stakeholders are aligned and apply coherent "One Health" approaches to build and strengthen country capacities to detect, prevent and respond to public health emergencies. Country ownership of the process is a key principle while SPH works to facilitate strategic cooperation among stakeholders and provide essential technical support.

Public health is constantly threatened by a wide range of outbreaks and other emergency hazards. Despite measures to prevent them, emergencies of varying types, scales and consequences still occur. Local, regional and global communities and countries, supported by the international community, must stand ready to respond to these emergencies. To be ready means to be well-coordinated. When preparedness is emphasized, responses are faster and more effective, and it is possible to limit the human, economic and societal consequences. Public health preparedness is a continuous process in which action, funding, partnerships and political commitment at all levels must be sustained. It relies on all stakeholders working together effectively to plan, invest in and implement priority actions.

The SPH team provides opportunities for multisectoral partnerships, collaboration and capacity-strengthening through four pillars: Strategic Partnership Leadership, Strategic Partnership Networks, Strategic Partnership Forums, and Strategic Partnership Resources.

The SPH Portal provides the essential platform for the data and resources supporting each of the pillars.





LEADERSHIP



3. LEADERSHIP

Under the WHO General Programme of Work (GPW 13), the WHO Health Emergencies Programme (WHE) is contributing to the strategic priority of having 1 billion more people better protected from health emergencies.

The Country Health Emergency Preparedness and IHR Department (CPI) works with all Member States and with partners to ensure that countries and populations, in particular the most vulnerable, are prepared for all-hazards emergencies, and are fulfilling their obligations to develop core capacities under IHR (2005).

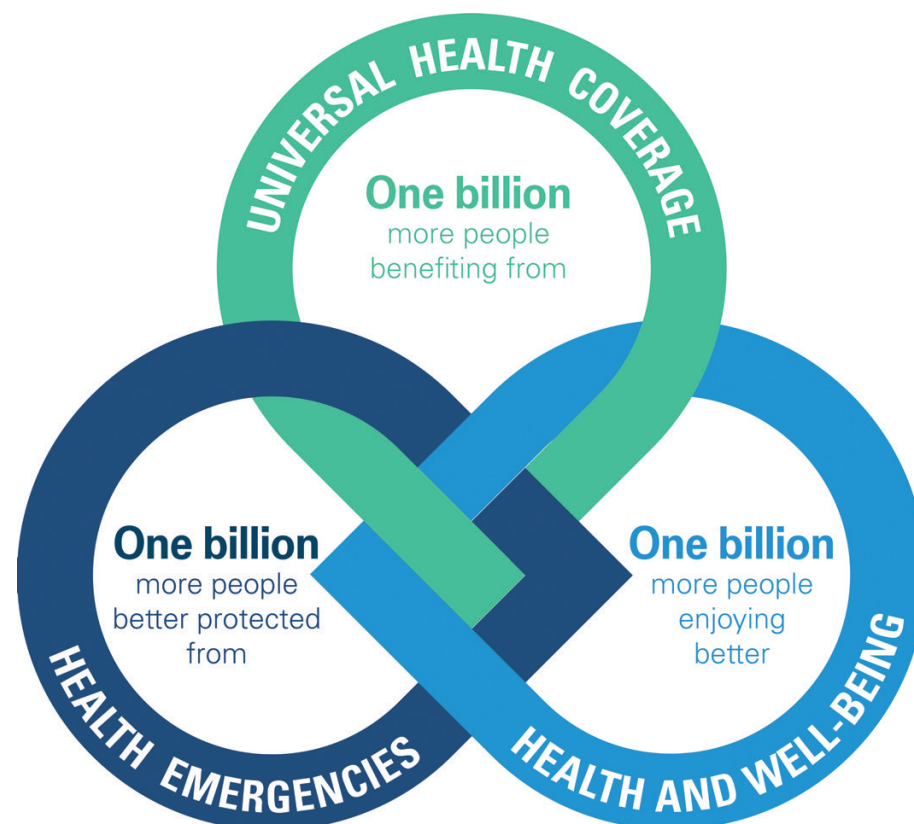
Within the CPI department, the Core Capacity Assessment, Monitoring and Evaluation (CME) Unit, together with WHO regional and country offices, coordinates and provides essential technical support to countries in their efforts to assess, monitor and improve the status of IHR (2005) implementation through the IHR Monitoring and Evaluation Framework. CME also provides operational tools to help countries build capacity with a “One Health” focus on zoonoses and other health threats arising at the human-animal interface.

The unit hosts SPH, which facilitates the coordination and harmonization of strategic partnership between stakeholders, donors and existing initiatives. SPH has convened several high-level meetings leading to actions, guidance, tools and commitments to improve and manage future global public health risks.

The SPH Portal is central to CPI strategic priorities, including the priority to build strategic partnerships for the implementation of IHR and health security through the scaling up of National Action Plans for Health Security (NAPHS) implementation anchored in resilient health systems. Creation within the portal of country, regional and global profiles based on the IHR Monitoring and Evaluating Framework is a core element in support of the priority.

The portal also contributes to the CPI strategic priority to reinforce IHR capacity building and its appropriation in the national context by States Parties, monitor implementation, and facilitate reporting to the WHO governing bodies. The SPH Portal provides a one-stop platform facilitating the robust analysis and dissemination of IHR (2005) data for decision-making based on comprehensive qualitative and quantitative consideration of gaps, needs and priorities.

The SPH Portal contains the meeting reports and other multimedia from those meetings, which include major consultations on health security and pandemic influenza preparedness planning, and on advancing collaboration between national military and civilian health sectors for health emergency preparedness.





NETWORKS

PARTNER MATCHING	16
ANTIMICROBIAL RESISTANCE (AMR) SUPPORT ACTIVITIES	16
PANDEMIC INFLUENZA PREPAREDNESS PLAN	18
UNIVERSAL HEALTH COVERAGE (UHC) AND HEALTH SYSTEMS	19



4. NETWORKS

Strategic Partnership Networks is a platform on the SPH Portal where Member States, partners and donors from different sectors share information and form collaborations to increase health security at all levels. It is a mechanism to form partnerships to advance IHR (2005) and health security capacity through effective public policy stewardship, governance and actions.

Member States, partners and donors have called for WHO to develop the Global Strategic Preparedness Networks (GSPN) and offer a more coherent and coordinated approach for the technical assistance provided to countries by stakeholder institutions, networks and organizations. GSPN is a partnership that would involve coordinating the deployment and secondment of technical experts to countries and fostering preparedness networks through the sharing of experience, expertise and best practices. The objective is to support countries in implementing their NAPHS, building capacities to prevent, detect and respond, and meeting IHR (2005) commitments.

The SPH Portal would be at the core of GSPN, providing data and visualization of the bilateral and multilateral health security investments and in-kind contributions of strategic partners, including Member States, intergovernmental organizations, development banks, institutes and non-state actors in 192 countries. The portal also plays a central role through convening global health security experts and coordinating partnership development. The progress and impact of GSPN will be tracked through the SPH Portal, and GSPN would strengthen the role of the portal as a match-making platform for health security actors to collaborate in accelerating IHR (2005) implementation.

Strategic Partnership Networks in the portal contains information on health systems, universal health coverage (UHC), pandemic influenza preparedness, antimicrobial resistance (AMR), with other aspects soon to be included. A key function in the portal of strategic partnership networks is partner matching.



PARTNER MATCHING

Partner matching is among the key interactive features of Strategic Partnership Networks, a feature that enables countries, partners and donors to use the SPH Portal to rapidly and efficiently connect with one another by comparing country needs and gaps with partner resources and priorities.

Partner matching is accomplished on the SPH Portal through an application in which donors and partners are able to list the nations, regions and IHR technical areas they would like to support. The application responds with a map that includes a list of countries that need support in the specified area, as well as a link with contact information so partners and donors can connect with the relevant focal point in the country.

The process is similar for Member States, who can specify areas of need and view a list of partners and donors interested in supporting that particular area, and contact information to allow them to connect. An example of the donor matching is shown below.

Matching Beneficiaries for JICA in 9 areas

Displaying 4 of 66 matches

ANTIMICROBIAL RESISTANCE (AMR) SUPPORT ACTIVITIES

The SPH Portal also includes data and resources for the other key areas of the Strategic Partnership Networks – pandemic influenza preparedness, UHC and health systems, and AMR.

Countries in the Global Health Security Agenda (GHSA) AMR Action Package have agreed to support work being coordinated by WHO, FAO, and OIE to develop an integrated and global package of activities to combat AMR. Many of the participating countries have substantial experience dealing with AMR and use their experience to contribute to AMR control or surveillance projects in other countries through bilateral or multilateral collaborations.

To prevent duplication of actions and improve collaboration and alignment of activities, countries in the GHSA AMR Action Package share information about current AMR support activities as well as expertise that can be offered by the donor countries in current or future collaborations.

The SPH Portal includes data such as the table shown below that displays ongoing AMR support activities as listed by the AMR technical areas.



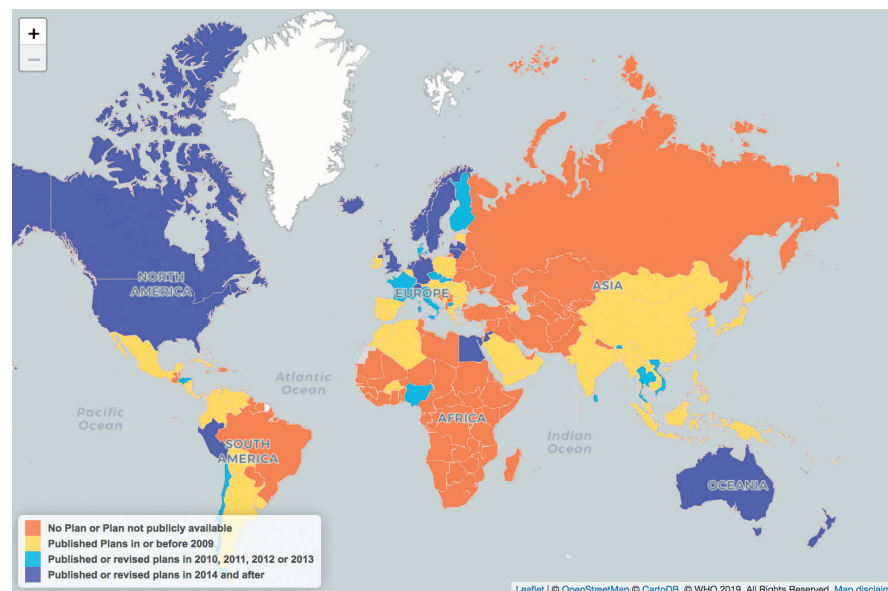


Recipient (Country/Region)	Donor (Country)	Donor Institute	Collaboration Type	Collaboration Details	EPI	DMI	MEX	LQM	ABU	IPC	ENH	VET	OHA	OBI	NAP
Brazil	Portugal	National Institute of Health Doutor Ricardo Jorge	Technical Support Capacity Building Knowledge Exchange	Details			●	●	●	●	●	●	●		
Burkina Faso	Germany	Robert Koch Institute (RKI)	Technical Support Capacity Building Knowledge Exchange	Details			●	●	●	●	●				
Burkina Faso	Germany	Robert Koch Institute (RKI)	Technical Support Capacity Building Knowledge Exchange	Details			●	●	●	●	●				

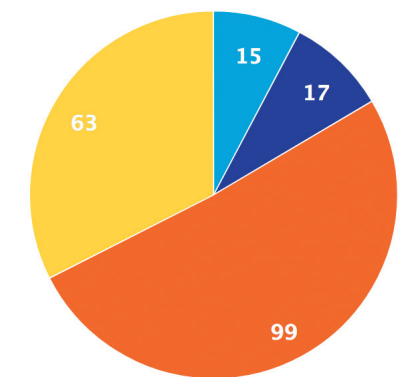
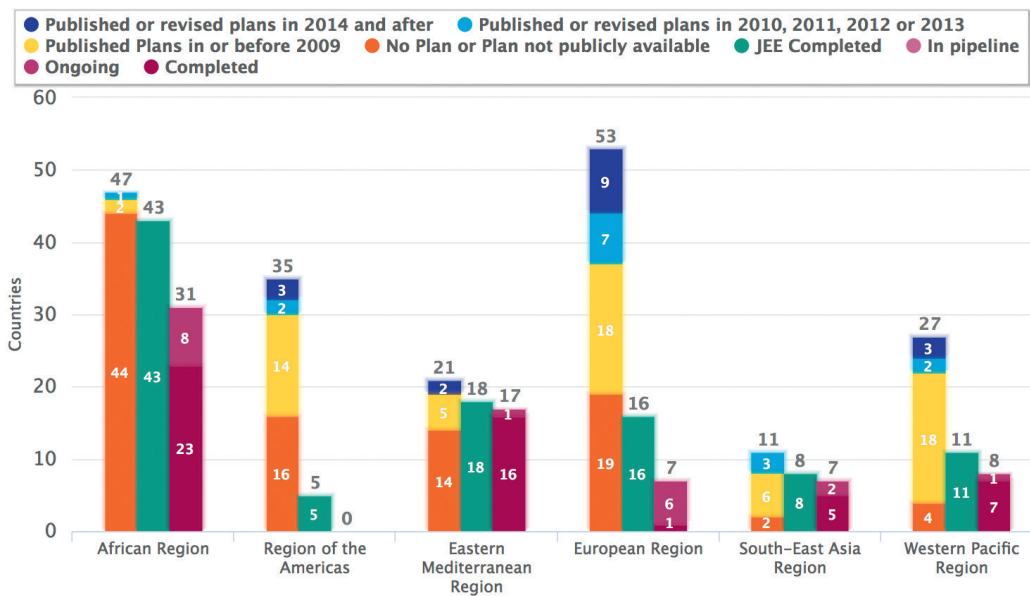


PANDEMIC INFLUENZA PREPAREDNESS PLAN

Influenza is an acute respiratory infection caused by influenza viruses which circulate in all parts of the world. It can cause serious public health concerns such as epidemics, zoonotic infections, as well as pandemics. WHO works to strengthen national, regional and global influenza response capacities including diagnostics, antiviral susceptibility monitoring, disease surveillance and outbreak responses, and to increase vaccine coverage among high-risk groups and prepare for the next influenza pandemic. The SPH Portal visualizes the global data on pandemic influenza preparedness planning, including mapping the countries that have created preparedness plans, detailing when those plans were last updated, and providing links to the available country influenza plans.



Leaflet | © OpenStreetMap © CartoDB, © WHO 2019. All Rights Reserved. Map disclaimer.



Legend for pie chart:
 ● No Plan or Plan not publicly available
 ● Published Plans in or before 2009
 ● Published or revised plans in 2010, 2011, 2012 or 2013
 ● Published or revised plans in 2014 and after



UNIVERSAL HEALTH COVERAGE (UHC) AND HEALTH SYSTEMS

Strong health systems are needed to ensure individual and global public health security. In 2014, the Ebola epidemic in West Africa highlighted the importance of health systems on the frontline of preparedness for epidemic surveillance and response. It is vital to ensure the capacity of health systems to take on public health emergencies, and to continue to provide essential care under even the most challenging circumstances. Strengthening local, provincial and national capacities under IHR (2005) is therefore a critical element of UHC. By investing in health emergency preparedness, a key component of UHC, pandemics and health epidemics can be at best prevented, and at least detected and responded to quickly, minimizing their health, and economic impact.

UHC means that all individuals and communities receive the health services they need without suffering financial hardship. It includes the full spectrum of essential, quality health services, from health promotion to prevention, treatment, rehabilitation, and palliative care. Achieving UHC is one of the targets the nations of the world set when adopting the Sustainable Development Goals in 2015. Countries that advance towards UHC will make progress towards the other health-related targets, and towards the other Sustainable Development Goals (SDGs).

The SPH Portal provides information on the importance of universal health coverage (UHC) and how to measure UHC progress, as well as documents with aggregated UHC, health system and SDG indicators by region.

The SPH Portal also features a searchable function showing the indicator status by region or country. WHO, together with the World Bank, has developed a framework to track the progress of UHC, and one of the indicators toward achieving UHC is compliance with IHR (2005). The SPH Portal supports the goal of achieving UHC through providing information on country IHR capacities, displaying country gaps and needs, visualizing partner investments and activities and helping match countries and partners for building health system resiliency.



Strategic Partnership for International Health Regulations (2005) and Health Security (SPH)
 Selected Indicators for SPH - African Continent

Date as 19 July 2019

		WHO HEALTH SECURITY - PREPAREDNESS														UHC and HEALTH SYSTEMS			SDG HEALTH and HEALTH RELATED INDICATORS						
		SPAR State Party Self-Assessment Annual Report	JEE Joint External Evaluation	AAR After Action Review	SIMEX Simulation Exercise	NAPHS National Action Plan for Health Security	IHR-PVS Bridging Workshop	STAR Strategic Tool for Assessing Risks	PIP Pandemic Influenza Preparedness Plan	EVD/Ebola Virus Disease Plan	AMR Action Plan	WHO - HRP Humanitarian Response Plan	WHO Emergency Grade	WHO FCS Fragile and Conflict States	CADRI Capacity for Disaster Reduction Initiative	UHC 2030	UHC Partnership	NHPS National Health Policy Strategy and Plan	UHC Health Service Coverage Index (%)	SDG Target 3.b - Development assistance and vaccine coverage (2017)	SDG Target 3.c - Health workforce (Medical doctors per 10000 population - 2016)	SDG Target 6.2 - Sanitation and hygiene Total Population using at least basic sanitation services (%)	SDG Target 13.1 - Natural disasters Average death rate due to natural disasters (per 100 000 population, 2012-2016) ²	Income Group (2019)	HIPC - (World Bank) Highly Indebted Poor Country
Algeria	AFRO	43 053	80						2009										76	0,01	18,300	98	<-0.1	UMIC	
Angola	AFRO	31 825	59	Yellow fever									2						36	2,09	2,149	50	<-0.1	LMIC	
Benin	AFRO	11 801	35	Lassa fever	EVD, Safe burial, Coordination	✓	✓	2017								✓	✓	✓	41	7,87	1,572	16	<-0.1	LIC	✓
Botswana	AFRO	2 304	26																60	7,64	3,688	77	0,1	UMIC	
Burkina Faso	AFRO	20 321	29	Dengue	EVD, Meningitis, Pandemic response	✓		2016	2005				2			✓	✓	✓	39	4,37	0,600	19	<-0.1	LIC	✓
Burundi	AFRO	11 531	23	Malaria		✓		2018		✓			2	✓		✓	✓	✓	43	8,75	0,500	46	0,2	LIC	✓
Cabo Verde	AFRO	550	46	Malaria, Zika				2017								✓	✓	✓	62	2,99		74	0	LMIC	
Cameroon	AFRO	25 876	38		Cholera, EVD	✓		2016					2			✓	✓	✓	44	2,46		39	<-0.1	LMIC	✓
Central African Republic	AFRO	4 745	13	Cholera	EVD, Rabies			2016		✓			2	✓		✓	✓	✓	33	10,49		0	0	LIC	✓
Chad	AFRO	15 947	29	Hepatitis E	EVD	✓	✓	2016								✓	✓	✓	29	2,44	0,475	8	<-0.1	LIC	✓



IHR MONITORING AND EVALUATION FRAMEWORK	23
STATES PARTIES ANNUAL REPORT (SPAR)	24
JOINT EXTERNAL EVALUATION	25
SIMULATION EXERCISES	26
AFTER ACTION REVIEWS	28
NATIONAL ACTION PLAN FOR HEALTH SECURITY (NAPHS)	28
ONE HEALTH OPERATIONS	29
EXPERTS	29
PARTNER MATCHING RESOURCES	30



RESOURCES



5. RESOURCES

Strategic Partnership Resources provides Member States, donors and partners with a wide array of country and donor profiles, IHR Monitoring and Evaluation Framework (MEF) documents and information, a database of experts, online training, guidelines, tools, and other useful links through the SPH Portal. Strategic Partnership Resources encourages Member States, partners and donors to share information on IHR (2005) implementation and health security, and serves as a bridge between countries, partners and donors by facilitating the matching of technical and financial resources.

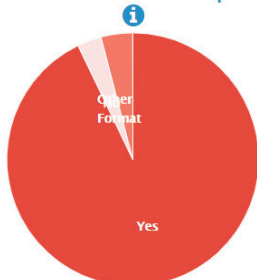
Together with Member States, WHO, donors and partners have created and accumulated a large amount of resources to prevent, detect, respond to and recover from public health emergencies. However, most of these resources are usually known and accessible to a limited number of stakeholders. SPH has endeavoured to map these resources and make them available through the portal to all Member States, partners and donors in order to increase efficiency, effectiveness and collaboration on the implementation of IHR (2005) and health security.

The Strategic Partnership Resources section of the SPH Portal includes documents, tools, guides and other information in categories including IHR Monitoring and Evaluation Framework, the States Parties Annual Report (SPAR), Joint External Evaluation (JEE), Simulation Exercises, After Action Reviews, National Action Plan for Health Security (NAPHS), One Health Operations, Experts, Donor and Partner Landscape, Country Profiles and Donor Profiles. Users can find a range of information and analysis, including illustrations of the global status of implementation of the IHR Monitoring and Evaluation Framework, pandemic influenza preparedness, AMR support activities and IHR-PVS National Bridging Workshops.

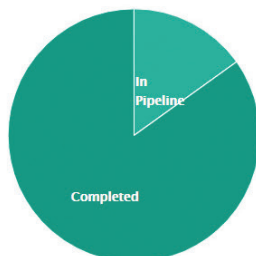


Global status of International Health Regulation (2005) and Health Security

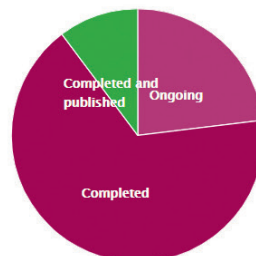
IHR States Parties Self-Assessment Annual Report 



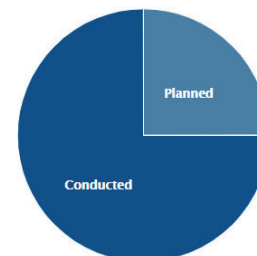
Joint External Evaluation 



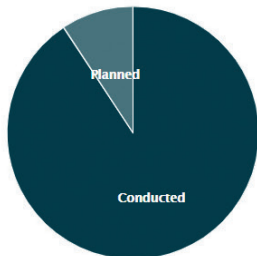
National Action Plan for Health Security 



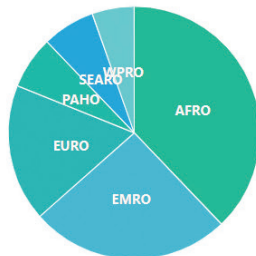
After Action Review 




Simulation Exercise 



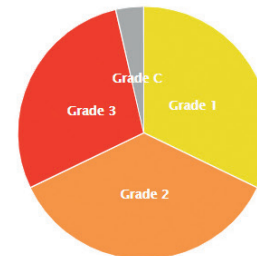
Universal Health Coverage 2030 



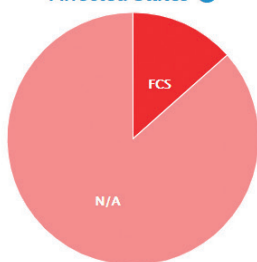
National Health Policies, Strategies and Plans 



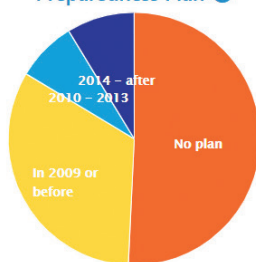
Emergency Grade 




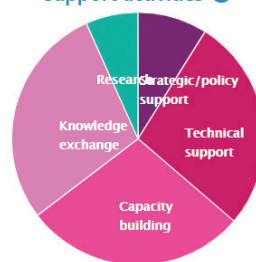
WHO Fragile and Conflict-Affected States 



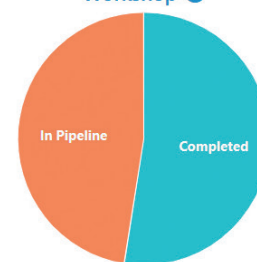
Influenza Pandemic Preparedness Plan 



Antimicrobial Resistance support activities 



IHR-PVS National Bridging Workshop 



IHR MONITORING AND EVALUATION FRAMEWORK

The IHR Monitoring and Evaluation Framework section of the portal provides data, documents and resources covering assessments of country core health security capacities under IHR (2005).

The framework comprises four components:

- IHR States Parties Self-Assessment Annual Reporting
- Joint External Evaluation
- After Action Review
- Simulation Exercises

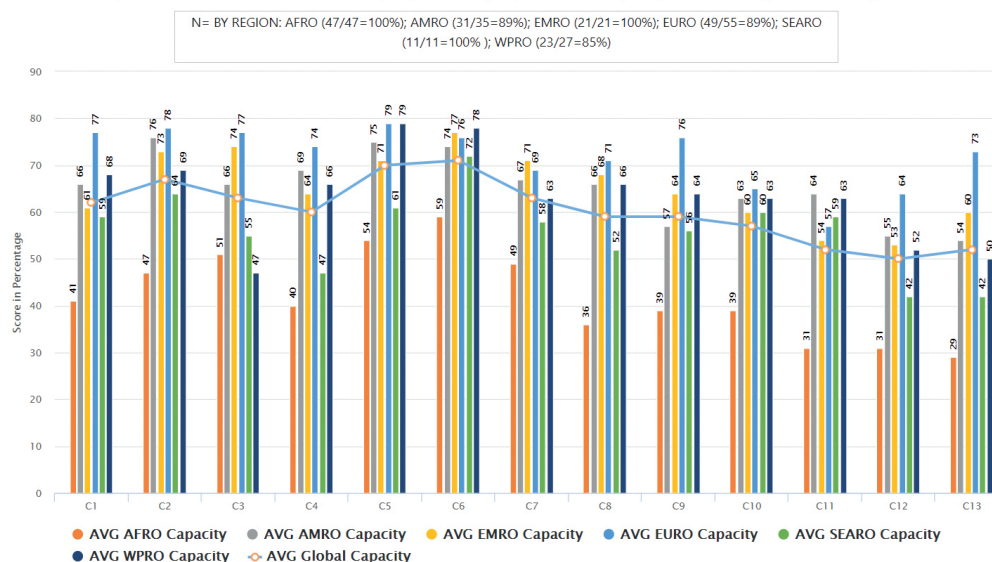
STATES PARTIES ANNUAL REPORT (SPAR)

The scoring results of the country self-assessed annual reports can be found on the SPH Portal, detailing each country's assessments of their own capacities under IHR (2005). The scores are used to monitor IHR Capacities, including monitoring SDG Targets, indicator 3.d.1 (IHR), and informing the WHO GPW13 index. The scores are searchable by country and region on the SPH Portal.

The States Parties Annual Report (SPAR) collects data using 24 indicators across 13 capacities capacities in the areas of national Legislation and financing, IHR strategic coordination, zoonotic events and the human-animal interface, food safety, laboratory surveillance, human resources, emergency preparedness for response, resilient health services, risk communication, points of entry, chemical events and radiation emergencies. WHO also developed the web-based platform e-SPAR (<https://extranet.who.int/e-spar>) to support reporting.



2018 State Parties Self-Assessment Annual Reports on IHR Implementation - Score per Capacity by WHO Regions
 Reports on SPAR2018 format GLOBAL N=182(92%) out of 190(96%) submitted / 196(100%) State Parties - updated on 10 May 2019



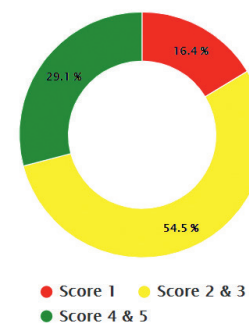
JOINT EXTERNAL EVALUATION

The Joint External Evaluation (JEE) is a voluntary part of the IHR Monitoring and Evaluation Framework and is a multisectoral process in which national and international experts assess country capacity to prevent, detect, and rapidly respond to public health risks. The JEE allows countries to identify the most urgent needs within their health security system; to prioritize opportunities for enhanced preparedness, detection and response capacity, including setting national priorities; and to allocate resources based on the findings. The technical areas covered in the JEE are grouped into four core areas: – prevent, detect, respond, and other IHR related hazards and points of entry. The JEE in this respect follows the principles outlined below:

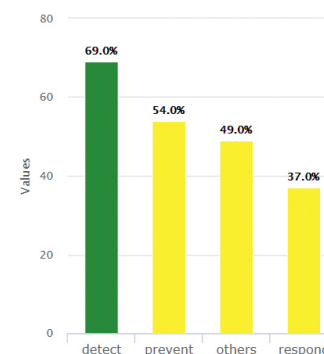
- Preventing and reducing the likelihood of outbreaks and other public health hazards and events defined by IHR is essential;
- Detecting threats early can save lives;
- Rapid and effective response requires multisectoral, national and international coordination and
- IHR capacities are required at points of entry, and during chemical events and radiation emergencies.

SPH is the platform for all country JEE reports and makes them available through the SPH Portal. The portal also displays the country scores in each technical area, divided into the categories of prevent, detect, respond and other hazards. The JEE dashboard in the portal includes global JEE mapping that provides visualization of country status, illustrating which countries have completed JEEs and which countries have a JEE in the pipeline.

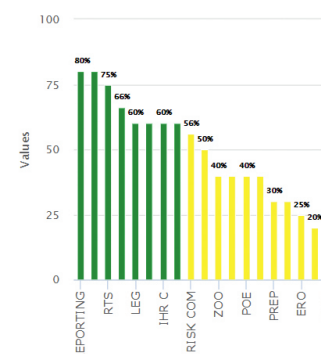
Indicator Scoring Percentage



Average percentage per category

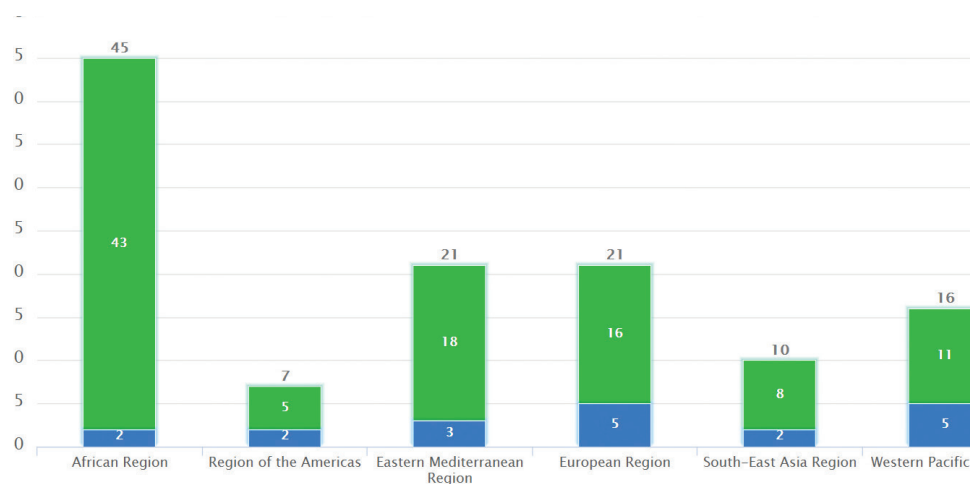


Average Percentage per Element



Prevent	Detect	Respond	Other Hazards	JEE Report
Element	Indicator	Score		
National Laboratory System	D.1.1 Laboratory testing for detection of priority diseases	4		
	D.1.2 Specimen referral and transport system	4		
	D.1.3 Effective modern point of care and laboratory based diagnostics	3		
	D.1.4 Laboratory quality system	1		
Real-Time Surveillance	D.2.1 Indicator and event based surveillance systems	4		
	D.2.2 Inter-operable, interconnected, electronic real-time reporting system	4		
	D.2.3 Analysis of surveillance data	3		
	D.2.4 Syndromic surveillance systems	4		
Reporting	D.3.1 System for efficient reporting to WHO, FAO and OIE	4		
	D.3.2 Reporting network and protocols in country	4		
Workforce Development	D.4.1 Human resources are available to implement IHR core capacity requirements	3		
	D.4.2 FETP or other applied epidemiology training programme is in place	4		

● Completed ● In Pipeline



SIMULATION EXERCISES

A simulation exercise is a form of practice, training, monitoring or evaluation of capabilities involving the description or simulation of an emergency, to which a described or simulated response is made. Simulation exercises can help to develop, assess and test functional capabilities of emergency systems, procedures and mechanisms.

Simulation exercises are training and quality assurance tools, which provide an evidence-based assessment for the monitoring, testing and strengthening of functional capacities to respond to outbreaks and public health emergencies. As a training tool, they allow participants to learn and practice emergency response procedures in a safe and controlled environment. As a quality assurance tool, exercises test and evaluate emergency policies, plans and procedures. Simulation exercises play a key role in the development and implementation of preparedness and response capacities at all levels (national, regional, community and global) and have been identified as a key component in the validation of core capacities under the IHR monitoring and evaluation framework (2015).

The SPH Portal provides guides and tools for conducting a simulation exercise, including an open source scenario video repository. This video repository has over 18 generic and specific scenario clips that can be used for different simulation exercises. In addition, the SPH Portal has information by country on completed and planned simulation exercises.

Region	Country	Status	Search keywords		
- Any -	- Any -	Conducted	<input type="text"/>		
<input type="button" value="Apply"/>					
Region	Country	Dates	Status	Objective	Report
African Region	Cabo Verde	1 October 2018 to 5 October 2018	Conducted	Cape Verde - Malaria	
African Region	Nigeria	2 July 2018 to 4 July 2018	Conducted	Monkeypox	
African Region	Nigeria	28 May 2018 to 31 May 2018	Conducted	Cholera	
African Region	Benin	17 July 2018 to 20 July 2018	Conducted	Lassa fever AAR	
African Region	Burkina Faso	16 April 2018 to 19 April 2018	Conducted	Dengue AAR	
African Region	Madagascar	2 July 2018 to 6 July 2018	Conducted	Madagascar – Plague	RT Madagascar20_09_2018.pdf

Videos

Generic Material
Specific Scenario

- National Response
- International Support
- Impact on national response operations, including health systems
- Emergency Alert
- Communicable Diseases
- Country Background Detail

Video Clip

Video Clip

Video Clip

Video Clip



AFTER ACTION REVIEWS





An After Action Review (AAR) is a qualitative review of actions taken to respond to an emergency as a means of identifying best practices, gaps and lessons learned. Following an emergency response to a public health event, an AAR seeks to identify what worked well or not and how these practices can be maintained, improved, institutionalized and shared with relevant stakeholders. Organisational learning requires continuous assessment of performance, looking at successes and challenges and ensuring that learning takes place to support continuous improvement. AAR is a simple methodology for facilitating this assessment. It works by bringing together a team to discuss a task, event, activity or project, in an open and honest environment. The systematic application of properly conducted AARs across an organization, or between organisations, can help to drive improvement, as well as, turn tacit knowledge into learning and build trust among team members. When applied correctly, AARs can become a key aspect of the internal system of learning and motivation, and should be part of all emergency management programmes.

The SPH Portal centralizes all available WHO resources to support the effective planning and implementation of an AAR. Those resources include guidance documents, tools and the e-learning course on AAR. The portal also provides a global mapping of planned and completed country AAR activities, with dates and objectives.

Region	Country	Dates	Status	Objective	Report
African Region	Burkina Faso	13 February 2017 to 15 February 2017	Conducted	Burkina Faso – Dengue	
African Region	Burundi	9 April 2018 to 14 April 2018	Conducted	Malaria AAR	
African Region	Cabo Verde	25 February 2019 to 1 March 2019	Conducted		REVISÃO PÓS AÇÃO DA EPIDEMIA ZIKA EM CABO VERDE.pdf
African Region	Cabo Verde	1 October 2018 to 5 October 2018	Conducted	Cape Verde - Malaria	
Western Pacific Region	Cambodia	1 July 2018 to 31 July 2018	Conducted	Methanol poisoning AAR	
Western Pacific	Cambodia	8 July 2016	Conducted	Avian Influenza H5N1 AAR	

AAR Guidance Documents	About AAR	AAR Implementation	AAR E-Learning Course	WHO Webpage for AAR	Other Resources
--	---------------------------	------------------------------------	---------------------------------------	-------------------------------------	---------------------------------

AAR Guidance Documents

<p>AAR Guides</p> <ul style="list-style-type: none"> Toolkit, Working Group AAR Toolkit, Debrief AAR Toolkit, Key Informant Interview AAR 	 <p>Guidance for After Action Review (AAR)</p>	 <p>AAR and Simulation</p>	 <p>(RUSSIAN) AAR</p>	 <p>(RUSSIAN) AAR</p>
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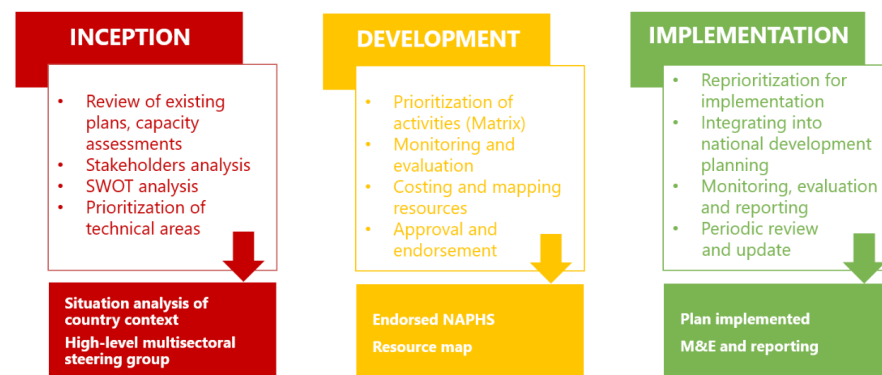


NATIONAL ACTION PLAN FOR HEALTH SECURITY (NAPHS)

WHO supports Member States in developing National Action Plans for Health Security (NAPHS) to accelerate the implementation of IHR (2005) core capacities. The country-owned, multi-year, planning process establishes national priorities for health security, identifies partners, brings sectors together and allocates resources for strengthening health security capacities.

The NAPHS planning process is designed to facilitate technical guidance to countries for the identification of evidence-based priority actions that can be implemented for immediate impact and to build sustainable and long-term health security capacities. NAPHS implementation enables Member States to address gaps identified in the country assessments through structured actions supported by stakeholders at the national, regional and global levels.

The SPH Portal provides information on the NAPHS process, country NAPHS reports, and a calendar of planning activities.

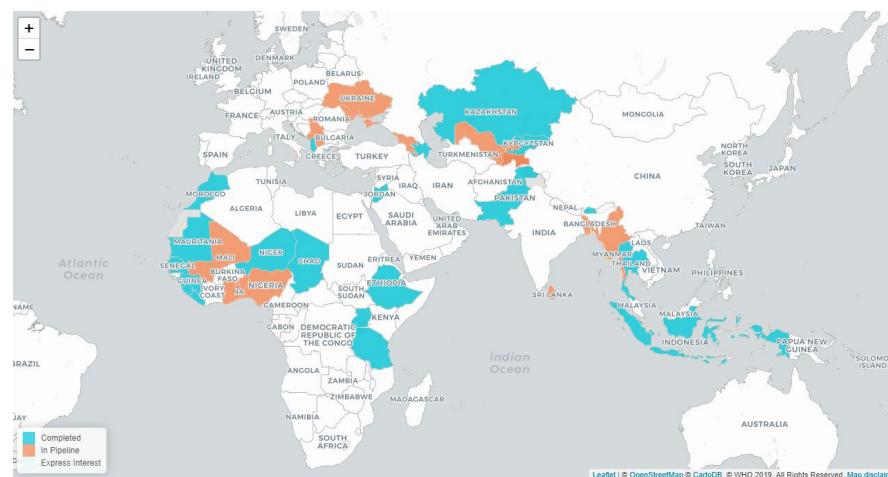


ONE HEALTH OPERATIONS

Many existing threats to human health, including zoonotic diseases, foodborne diseases, chemical events, radiological events, and antimicrobial resistance are complex, and cannot be managed by the human health sector alone. In the context of the IHR Monitoring and Evaluation Framework, taking a One Health approach means including, from all relevant sectors, national information, expertise, perspectives, and experience necessary to conduct the assessments, evaluations, reporting and preparedness activities.

The WHO International Health Regulations (IHR) (2005) and OIE Performance of Veterinary Services (PVS) assess and support the human and animal health systems, respectively, but coordination across the two sectors remains challenging in many country settings. The IHR-PVS National Bridging Workshops bring together actors from the animal and human health sectors and present a structured, guided methodology, allowing participants to collectively identify barriers to synergy and existing gaps in collaboration. Corrective measures are identified to form a roadmap to improve the collaboration between the two sectors in the prevention, detection and response to zoonotic disease outbreaks and other health issues at the interface between humans and animals.

The SPH Portal maps which countries have completed country IHR-PVS National Bridging Workshops (NBW), and provides the calendar of upcoming workshops as well as the roadmaps and reports from completed workshops. The portal links to the participant handbook for IHR-PVS bridging and to the handbook for the assessment of capacities at the human-animal interface.



Region	Country	Dates	NBW Status	Title	Road-map	Report
African Region	Guinea	17 July 2018 to 19 July 2018	Completed	IHR-PVS Bridging Workshop in Guinea	Download NBW Guinea - Final roadmap.pdf (307.24 KB)	Download NBW Guinea - Final report.pdf (2.04 MB)
African Region	Ethiopia	29 May 2018 to 31 May 2018	Completed	IHR-PVS Bridging Workshop in Ethiopia	Download NBW Ethiopia - Final roadmap.pdf (170.26 KB)	Download NBW Ethiopia - Final report.pdf (911.99 KB)
African Region	Senegal	14 November 2017 to 16 November 2017	Completed	IHR-PVS Bridging Workshop in Senegal	Download NBW Senegal - Final Roadmap.pdf (114.2 KB)	Download NBW Senegal - Final report.pdf (2.22 MB)
African Region	United Republic of Tanzania	16 October 2017 to 18 October 2017	Completed	IHR-PVS Bridging Workshop in Tanzania	Download NBW Tanzania - Final Roadmap.pdf (160.79 KB)	Download NBW Tanzania - Final report.pdf (2.18 MB)
African Region	Uganda	25 September 2017 to 27 September 2017	Completed	IHR-PVS Bridging Workshop in Uganda	Download NBW Uganda - Final Roadmap.pdf (98.8 KB)	Download NBW Uganda - Final Report.pdf (1.96 MB)



EXPERTS

The SPH Portal features a register of global experts, originally compiled to support the JEE process and that has since been expanded to serve as a source of potential technical assistance for other aspects of the IHR Monitoring and Evaluation Framework (MEF) as well. The registry includes nearly 1000 technical experts who have the necessary experience, technical capacity and interpersonal skills to contribute effectively to IHR activities.

A search function in the database allows the sorting of experts by technical area of expertise, region, nationality, gender, language, training categories, mission categories and calendar availability. It helps WHO and Member States to select technical experts who can then be rostered on missions.

Experts can update their personal data in the database and request to participate in missions. Personal information, confidentiality and DOI forms signed by experts are only shared with third parties with prior consent, whereas name, technical expertise, brief bio and photograph are in the public domain. Detailed information is password protected and accessible by WHO staff and individual experts only.

	<p>Angela WIRTZ Job Title: Doctor/ Specialist in paediatrics Ministry of Social Health (Hessisches Ministerium fuer Soziales und Gesundheit)</p>	<p>Region: European Region Interests: Available: Not specified</p>
	<p>Anibal VELJESQUEZ Job Title: Former Health Minister in Peru Ministry of Health Peru</p>	<p>Region: Region of the Americas Interests: Available: Not specified Language: Spanish</p>
	<p>Anka CVETKOVIC Institute of Public Health of Belgrade</p>	<p>Region: European Region Interests: Available: Not specified</p>

PARTNER MATCHING RESOURCES

Donor and partner landscape

Donors and partners are essential stakeholders in ensuring the implementation of the IHR (2005) and global health security. The “donor and partner landscape” section of the SPH Portal details the activities and the areas of interest of donors and partners involved in IHR and health security.

Donor and partner landscape information is designed to harmonize and align funding and activities to prevent duplication in the portal and ensure resources are targeted for the maximum public health benefit. Multisectoral partners have committed to working closely and actively with WHO and each other in sharing information and making their technical and funding contributions as complementary, synergistic and coordinated as possible. Donor and partner landscape information is designed to harmonize and align funding and activities to prevent duplication and ensure resources are targeted for the maximum public health benefit. Data in the donor and partner landscape is input by the SPH team and obtained from donors and partners directly, from WHO regional and country offices, from the countries themselves and from public websites.

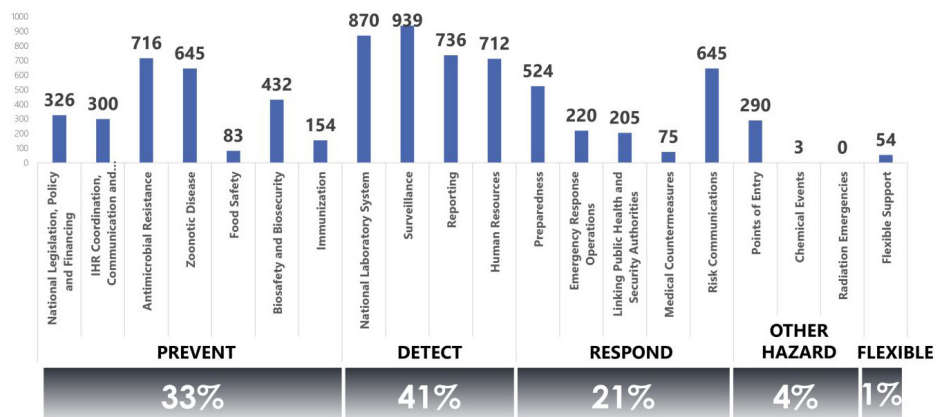
Prevent Detect Respond Other Hazards Flexible Support Influenza

- Any Region - - Any Channel - Search:

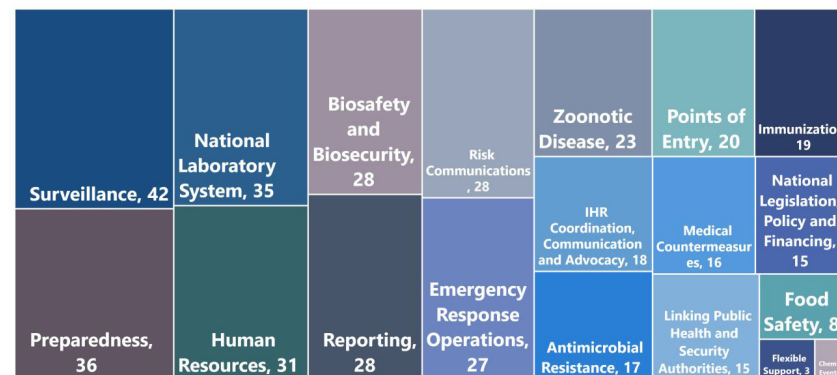
Country	LEG	CRD	AMR	ZOO	FS	B+B	IMM
Equatorial Guinea	European Union The Fleming Fund	European Union The Fleming Fund	European Union The Fleming Fund	European Union The Fleming Fund		The Fleming Fund	
Eritrea	European Union The Fleming Fund	European Union The Fleming Fund	European Union The Fleming Fund	European Union The Fleming Fund		The Fleming Fund	JICA
Estonia	European Union		European Union	European Union Switzerland		European Union	European Union Switzerland
Ethiopia	BMGF European Union The Fleming Fund USAID	European Union The Fleming Fund	CDC BMGF European Union The Fleming Fund	CDC BMGF European Union The Fleming Fund USAID	USAID	CDC The Fleming Fund USAID	CDC



Donor and Partner Landscape Data included in SPH Portal

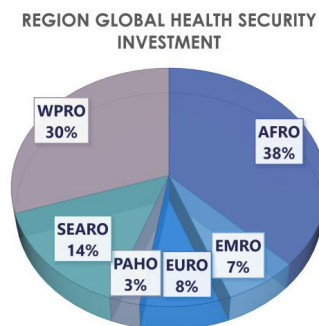


DONORS/PARTNERS Investments in Technical Areas

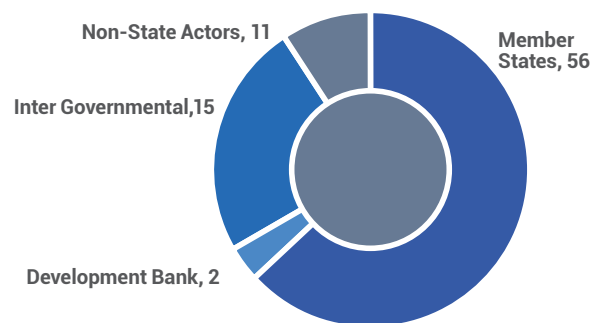


Global Health Security Investment Landscape (Mapping Bilateral & Multilateral)

1892
TOTAL COLLECTED INVESTMENT IN
192 COUNTRIES



DONORS / PARTNERS



84
TOTAL



Country profiles

The country profiles section of the portal offers information on the health security status and needs of 194 countries. The country profile provides the following:

- IHR States Parties Self-Assessment Annual Reporting
- Joint External Evaluations
- National Action Plan for Health Security
- After Action Review
- Simulation Exercise
- Pandemic Influenza Preparedness Plan
- Antimicrobial Resistance support activities
- UHC and Health System
- Health Emergency
- IHR-PVS Bridging Workshop
- News
- Calendar
- Photos
- Videos
- Documents



Sierra Leone

[WHO Country Profile - Sierra Leone](#)

[WHO Country Cooperation Strategies and Briefs - Sierra Leone](#)

Health Security Status

NAPHS: Completed

Annual Report | Joint External Evaluation (JEE) | NAPHS Report | After Action Review | Simulation Exercise | Influenza Plan

AMR | Health System UHC | Health Emergency | IHR-PVS Bridging Workshop

Health Security Needs

LEG National Legislation, Policy...	CRD IHR Coordination, Commu...	AMR Antimicrobial Resistance	ZOO Zoonotic Disease
FS Food Safety	B+B Biosafety and Biosecurity	IMM Immunization	LAB National Laboratory System
RPT Reporting	HR Human Resources	PRE Emergency Preparedness	MCM Medical Countermeasures ...
COM Risk Communications	PoE Points of Entry	CHE Chemical Events	RAD Radiation Emergencies

Donor Landscape

Bilateral (4) | Through WHO (1) | Other agencies (5)

CDC

AMR ZOO B+B LAB SUR RPT HR ERO

PHS MCM FS

DFID

LAB SUR

European Union

LEG CRD AMR ZOO B+B LAB SUR RPT


HR PRE PHS COM PoE

Resolve to Save Lives

FS

Resources

News | Calendar | Photos | Videos | Documents



23 April 2018 to 26 April 2018

Workshop on Prioritization, Resource Mapping and Multi-sectoral Partnership Collaboration for the Implementation of the NAPHS

The meeting was attended by 61 participants from National key stakeholders, University, Donors and... [More](#)

[View all news](#)



Donor profiles

The donor profiles section of the portal provides information about the donors/partners who are actively funding health security activities. The section includes the health security areas each donor is interested in funding and the countries it is supporting, as well as a link to its website. The donor profile provides the following:

- Donor information with website URL
- Donor's supported technical areas
- Donor's beneficiaries and list of activities categorized by technical areas.

Displaying 8 of 25 beneficiaries

Country	Technical Areas
Afghanistan	AMR, IMM, HR
China	AMR, HR, PRE
Democratic Republic of the Congo	LAB, PRE
Egypt	LAB, HR



Japan International Cooperation Agency (JICA)

The Japan International Cooperation Agency (JICA) is advancing its activities around the pillars of a field-oriented approach, human security, and enhanced effectiveness, efficiency, and speed. It is a governmental agency that coordinates official development assistance (ODA) for the government of Japan. It is chartered with assisting economic and social growth in developing countries, and the promotion of international cooperation. JICA is part of Japan's official development assistance effort, with a role in providing technical cooperation, capital grants and yen loans. JICA's core development programs (aid modalities) are technical assistance programs/projects for capacity and institutional development, feasibility studies and master plans. JICA provides technical training for participants from the developing countries in a wide range of fields, including medical, industrial, and agricultural training. Major aid modalities: Technical assistance programs/projects for capacity and institutional development Feasibility studies and master plans Dispatch of Specialists Specialists dispatched to the field include those recommended from related government ministries and agencies as well as those applying through the specialist registration system. Assignments range from extended stays of over a year to shorter stays of less than one year.

[JICA Website](#)

Supported technical Areas

Click on any area to filter

All Show all	AMR Antimicrobial Resistance	ZOO Zoonotic Disease	B+B Biosafety and Biosecurity
IMM Immunization	LAB National Laboratory System	SUR Surveillance	RPT Reporting
HR Human Resources	PRE Emergency Preparedness		



C FORUM



6. FORUM

*The SPH Portal includes a section on **Strategic Partnership Forum**, a high-level forum with events that bring together Member States, multisectoral partners and donors to align investment priorities for current and future IHR (2005) and health security needs and gaps. The forum facilitates convergence with key strategic areas such as influenza, AMR, UHC, strengthened and resilient health systems, and the Sustainable Development Goals (SDGs).*

SPH Forum is designed to foster relationships among global health security actors and to enhance collaboration and cooperation for health security, using the SPH Portal as a common platform.

The Strategic Partnership Forum for IHR and Health Security in Africa (SPH Africa) held in 2015 under the theme “Building Health Security Beyond Ebola” stipulated actions that WHO, Member States and partners should take. Those include implementation of a collective, coherent and synergistic approach when supporting joint assessments of preparedness and testing of national plans, active coordination and collaboration to ensure relevant information is shared timely, and country commitments to provide national leadership, sustained support and domestic resources. SPH will continue to engage stakeholders in events to assess national, regional and global progress on IHR (2005), give input into the global strategic framework for multisectoral partnership, and create commitments to supporting Member States in the implementation of their NAPHS. SPH Forum will be developed further in the portal over time.



7 FEATURES

NEWS	39
CALENDAR	39
PUBLICATIONS	40
MULTIMEDIA	40



7. FEATURES

NEWS

The SPH Portal provides news and highlights of activities, missions and events related to IHR (2005) and national, regional and global health security, including country, donor and partner news.



12 - 14 February 2019 - Istanbul
European countries meet in Istanbul to discuss implementation of the Action Plan to Improve Public Health Preparedness and Response in the WHO European Region
 A three-day ministerial consultation and high-level technical meeting took place in Istanbul, Turkey, on 12-14 February 2019. The purpose of the meeting was to galvanize the commitment of Member States to fully implement the new Action Plan to Improve Public Health Preparedness a...
[Read More](#)



12 - 14 February 2019 - Geneva
Training Up at WHO for Simulation Exercises
 The WHE Simulation Exercises Task Team (SimEx TT) held a workshop on 12-14 February in Geneva with WHO SimEx staff from Regional Offices and Headquarters. This first WHE SimEx workshop reviewed existing SimEx training content, structure and methodology. It will be used to further...
[Read More](#)



24 Jan 2019 - 1 Feb 2019 - Geneva
The Executive Board meeting took place in WHO
 The EB acknowledged the progress made by WHO in the area of preparedness and response to emergencies and provided additional guidance. This event was also a good opportunity to meet with our Member States and key partners to discuss health emergency preparedness and next activities...
[Read More](#)

CALENDAR

The SPH Portal has a calendar of events and missions related to SPH and IHR MEF (Joint External Evaluation, After Action Review, Simulation Exercises, NAPHS). It also includes country, donor and partner events related to IHR (2005) and health security.

Health Security Calendar

2019

January 2019	February 2019	March 2019
<ul style="list-style-type: none"> SE 8 January 2019 to 11 January 2019 Rwanda FSX JAN2019 EV 16 January 2019 to 18 January 2019 Expert consultation on Tripartite Zoonoses Guide Operational Tool Development: Multisectoral Coordination EV 24 January 2019 to 1 February 2019 WHO Executive Board 144 SE 28 January 2019 to 30 January 2019 Pakistan TTX Jan.2019 	<ul style="list-style-type: none"> NP 3 February 2019 to 6 February 2019 United Arab Emirates EV 4 February 2019 to 8 February 2019 First mission to document progress following the JEE and the implementation of NAPHS JE 11 February 2019 to 15 February 2019 Malawi EV 12 February 2019 to 14 February 2019 WHO Health Emergencies Programme SimEx Task Team Training Workshop NP 18 February 2019 to 22 February 2019 Zimbabwe AR 25 February 2019 to 1 March 2019 Cabo Verde - Zika.2019 	<ul style="list-style-type: none"> SE 1 March 2019 to 31 March 2019 Tanzania FSX March2019 JE 1 March 2019 to 31 March 2019 Gabon EV 2 March 2019 to 9 March 2019 Ebola Virus Disease Preparedness Mission NP 4 March 2019 to 8 March 2019 Zambia EV 6 March 2019 to 7 March 2019 WHO expert group consultation on health systems for health security JE 10 March 2019 to 15 March 2019 Congo



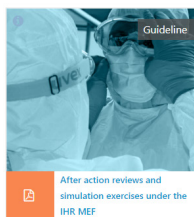
PUBLICATIONS

The SPH Portal includes a publications section where users can access a wide range of checklists, guidelines, plans, presentations, reports and tools from countries, regions and WHO headquarters. A search function allows users to find documents by country, region and type.

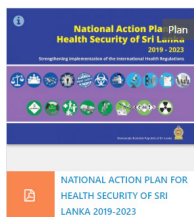
MULTIMEDIA

Photo gallery & Videos

The SPH Portal also includes a photo gallery and collection of videos related to IHR (2005) and health security, including photos from IHR-related events and videos on simulation exercises, country NAPHS planning and collaboration between the civilian and military health sectors.



After action reviews and simulation exercises under the IHR MEF



NATIONAL ACTION PLAN FOR HEALTH SECURITY OF SRI LANKA 2019-2023



PIP Partnership Contribution High-Level Implementation Plan I Final Report, 2014-2017



AUSTRALIA'S NATIONAL ACTION PLAN FOR HEALTH SECURITY 2019-2023



The global technical consultation on Strengthening National Health Security through Pandemic Influenza Preparedness Planning

Hong Kong SAR - China 10 December 2018 to 12 December 2018



Expert Roundtable: Development of a guide for Multisectoral Partnership Coordination for IHR (2005) and Health Security

Paris, France 4 October 2018 to 5 October 2018



Workshop on Prioritization, Resource Mapping and Multi-sectoral Partnership Collaboration for the Implementation of the NAPHS

Freetown, Sierra Leone 23 April 2018 to 26 April 2018



A large, dark grey, stylized letter 'S' that is partially open at the top and bottom, serving as a background for the main title.

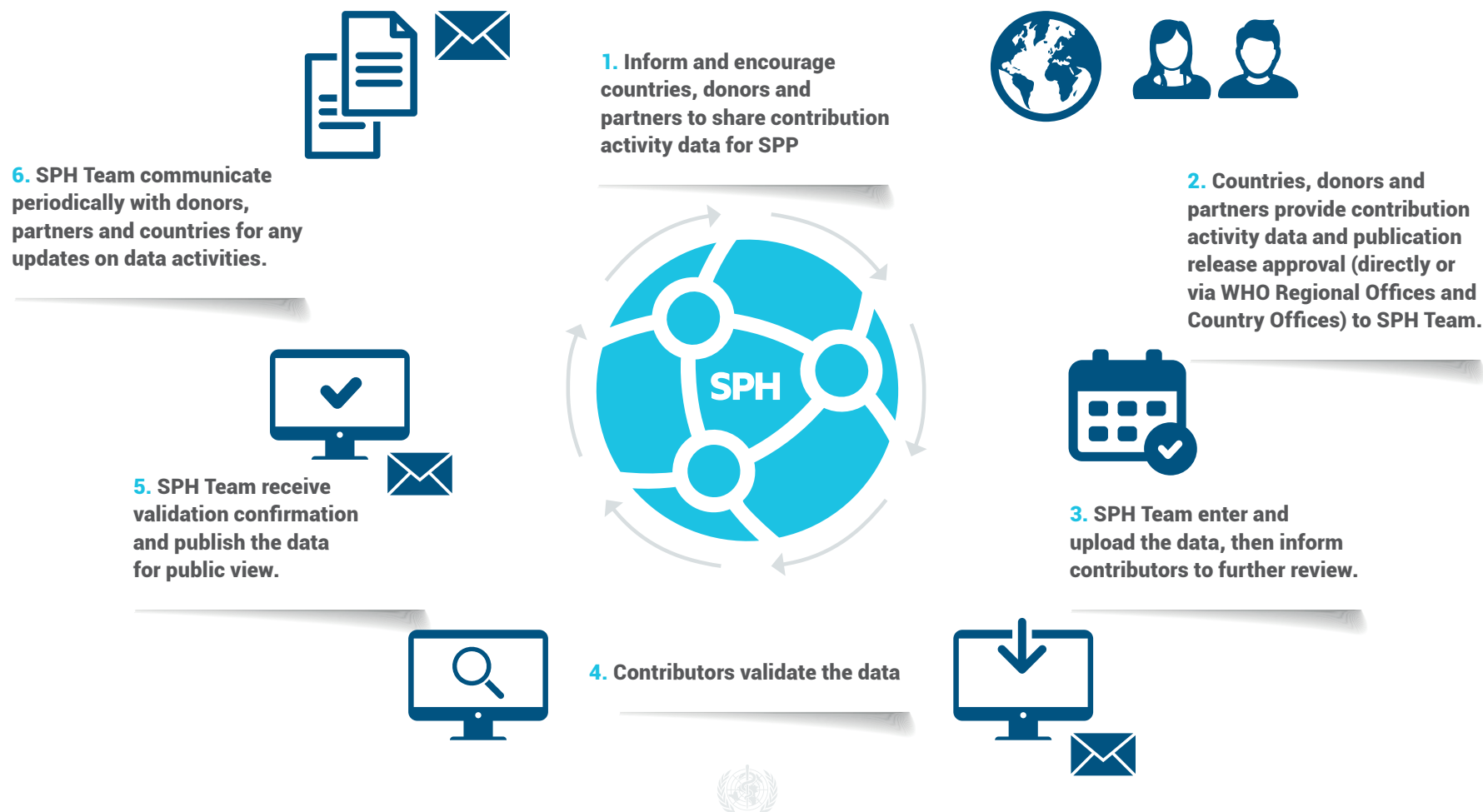
VALIDATION PROCESS

A horizontal bar with a gradient from light grey to dark grey, positioned below the main title.

8. VALIDATION PROCESS

All data in the SPH website is input by the SPH team after being obtained from donors and partners directly, from WHO regional and country offices, from the countries themselves and from public websites.

The SPH team has a data validation process in order to ensure that data delivered to stakeholders is reliable and accurate. The process includes review and verification of the data prior to publication and periodic communication with donors, partners and countries to provide for updates.





CONTACT DETAILS

WHO STRATEGIC PARTNERSHIP FOR INTERNATIONAL HEALTH REGULATIONS (2005) AND HEALTH SECURITY (SPH)

Country Health Emergency Preparedness and IHR
World Health Organization
20 Avenue Appia
CH-1211 Geneva
Switzerland

sph@who.int

<https://extranet.who.int/sph/>

